

TRANSFUSION REACTION INVESTIGATION RECORD
BAYNE-JONES ARMY COMMUNITY HOSPITAL
FORT POLK, LA 71459-5200

Requesting Location must complete Section A, B and C before sending to Laboratory.

A: Patient Info: 	B: CLINICAL REPORT: Date: _____ Rash: _____ Chills: _____ Temp ▲ : _____ Pain: _____ Dyspnea: _____ Others: _____ <div style="text-align: right;">M.D. / R.N.</div>
BLOOD BANK REPORT Returned to blood bank: DONOR # _____ Amount returned to Blood Bank: _____ mL <div style="display: flex; justify-content: space-between;"> Whole Blood Packed Cells Other </div>	C: HCPs Clinical Findings:

SECTION 1

Clerical Check indicates: No Clerical Errors Clerical Errors: _____

SECTION 2

ABO GROUPING Rh TYPING & DIRECT ANTIGLOBULIN TESTS	ANTISERA						CELLS		INTERP'S		DIRECT	COMMENTS
	A	B	D	DC	Du	CC	A1	A2	ABO	Rh	COOMBS	
Patient (Pre-transfusion)												
Patient (Post-transfusion)												
Donor (Container Sample)												

NOTE: If hemolysis is present on the post-transfusion sample, post-transfusion urine must be tested for free hemoglobin immediately.	VISUAL				Direct AHG Testing
	HEMOLYSIS		ICTERUS		
	YES	NO	YES	NO	
Pre-transfusion Blood Specimen					
Post-transfusion Blood Specimen					
Donor Unit					
Post-transfusion Urine Sample					

URINE HEMOGLOBIN: YES / NO

SECTION 3

Complete only if Section 1 or Section 2 contain Positive Results.

COMPATABILITY TESTS		ALBUMIN		AHG	CC	INTERPRETATIONS
Pre-transfusion Patient sample + Container Sample	MAJOR	I.S.	37°C			
Post-transfusion Patient sample + Container Sample	MAJOR	I.S.	37°C			

ANTIBODY SCREEN		ALBUMIN		AHG	CC	INTERPRETATIONS
Patient's serum (Pre-transfusion)	I	I.S.	37°C			
	II	I.S.	37°C			
	III	I.S.	37°C			
Patient's serum (Post-transfusion)	I	I.S.	37°C			
	II	I.S.	37°C			
	III	I.S.	37°C			
Donor's serum or plasma	I	I.S.	37°C			
	II	I.S.	37°C			
	III	I.S.	37°C			

DATE: _____ TECH: _____

PATHOLOGIST INTERPRETATION / IMPRESSION: